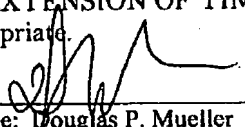


**RECEIVED
CENTRAL FAX CENTER****AUG 06 2007****HAMRE, SCHUMANN,
MUELLER & LARSON, P.C.**

AN INTERNATIONAL INTELLECTUAL PROPERTY LAW FIRM

FAX TRANSMISSION August 6, 2007**TO:** Mail Stop: AMENDMENT
Examiner: CORRIGAN, Joseph James
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450**FROM:** Douglas P. Mueller**OUR REF:** 10873.1582USWO**TELEPHONE:** (612) 455.3800**Total pages, including cover letter:** 10**PTO FAX NUMBER:** 571.273.8300**If all pages are NOT received, please call us at 612.455.3800 or fax us at 612.455.3801.****Title of Document: Response****Applicant:** UMENO
Serial No.: 10/529154
App. Filed: March 24, 2005
Group Art No.: 3709

Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

By: 
Name: Douglas P. Mueller
Reg. No: 30,300

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Lauren Sindt

Signature

August 6, 2007
Date

225 SOUTH SIXTH STREET · SUITE 2650 · MINNEAPOLIS · MN 55402
TEL. 612.455.3800 · FAX 612.455.3801
WWW.HSML.COM · MAIL@HSML.COM

**RECEIVED
CENTRAL FAX CENTER****AUG 06 2007**

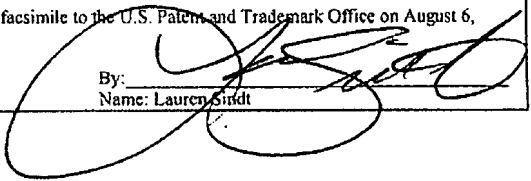
S/N 10/529154

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	UMENO	Examiner:	CORRIGAN, JOSEPH JAMES
Serial No.:	10/529154	Group Art Unit:	3709
Filed:	March 24, 2005	Docket No.:	10873.1582USWO
Title:	COOLING DEVICE		

CERTIFICATE UNDER 37 CFR 1.6(d):

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on August 6, 2007.

By: 
Name: Lauren Sindt

Mail Stop: AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

RESPONSE

Dear Commissioner:

Applicant responds to the Office Action mailed May 4, 2007, please amend the above-identified application as follows:

Remarks/Arguments begin on page 2 of this paper.